## Issue Classification



| Application/Control No. | Applicant(s)/Patent Under Reexamination |  |  |  |  |  |  |  |
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| 10590129                | ISSLER ET AL.                           |  |  |  |  |  |  |  |
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| Examiner                | Art Unit                                |  |  |  |  |  |  |  |
|                         |   |  |  |  |  |  |  |  |
| MICHAEL LESLIE          | 3745                                    |  |  |  |  |  |  |  |

| ORIGINAL           |     |                                 |   |   |              | INTERNATIONAL CLASSIFICATION |   |                     |   |          |          |  |             |          |  |  |
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| CLASS SUBCLASS     |     |                                 |   |   |              | CLAIMED                      |   |                     |   |          |          |  | NON-CLAIMED |          |  |  |
| 92 187             |     |                                 |   | F | 1            | 6                            | J | 1 / 14 (2006.01.01) |   |          |          |  |             |          |  |  |
| CROSS REFERENCE(S) |     |                                 |   |   |              |                              |   |                     |   | $\vdash$ |          |  |             |          |  |  |
| CLASS              | SUB | BCLASS (ONE SUBCLASS PER BLOCK) |   |   |              |                              |   |                     |   |          |          |  |             |          |  |  |
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| ⊠      | Claims renumbered in the same order as presented by applicant |       |          |       |          |       |          | СР    | A [      | ] T.D. | ☐ R.1.47 |       |          |       |          |
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| NONE   | Total Claims Allowed: |                     |                   |  |  |
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| (Assistant Examiner)                               | (Date)                | Ę                   | )                 |  |  |
| /MICHAEL LESLIE/<br>Primary Examiner.Art Unit 3745 | 9/9/2009              | O.G. Print Claim(s) | O.G. Print Figure |  |  |
| (Primary Examiner)                                 | (Date)                | 1                   | 1, 2              |  |  |